



Call for inspections:  
293-6462  
24-hour inspection line

THE CITY OF KEY WEST  
BUILDING DEPARTMENT  
P.O. BOX 1489  
KEY WEST, FL 33041-1489  
(305) 878-3950

Application Number . . . . . 15-00002868 Date 7/21/15  
Application pin number . . . . . 494679  
Property Address . . . . . 920 CAROLINE ST  
RE #/PARCEL #/TAX ID etc . . . . . 0000-2790-000000-  
Application type description . . . . . MECHANICAL ONLY  
Property Zoning . . . . . HIGH DENSITY RESIDENTIAL  
Application valuation . . . . . 5500

Owner . . . . . PENSICO TRUST COMPANY FBO  
DREW & CARO MAKENZIE IRA/  
191 PEARL AVE  
TRAVERTER FL 33070  
Contractor . . . . . ALL WEATHER AIR CONDITIONING &  
1620 BAHAMA DR  
KEY WEST FL 33040  
(305) 360-0642

Permit . . . . . MECHANICAL PERMIT  
Additional desc . . . . . GH  
Permit Fee . . . . . 94.00  
Issue Date . . . . . 7/21/15 Valuation . . . . . 0  
Expiration Date . . . . . 7/20/17

Qty	Unit	Charge	Per	Extension
			BASE FEE	94.00

Special Notes and Comments  
REPLACE EXISTING A/C SYSTEM FRONT  
PORTION OF BLDG. 5-TON CONDENSING UNIT  
MOUNTED ON EXISTING STAND ON ROOF. NEW  
AIR HANDLER TO BE HUNG HORIZ. ATTACHED  
TO EXISTING DUCTWORK. GH  
HARC #15-01-1081-HSA-7/14/15-KP.  
If railings are needed, they need HARC  
approval (KP)\*\*  
T/S:07/13/2015 10:27 AM KEYWGRC

Other Fees . . . . . APPLICATION FEE MECK NEW 50.00  
DCA SURCHARGE: F8553.721 2.00  
EDUCATION FEE 2.00  
PLAN REVIEW FEE 10.00  
DBPR SURCHARGE: F8468.631 2.00

Fee summary	Charged	Paid	Credited	Due
Permit Fee Total	94.00	50.00	.00	94.00
Other Fee Total	66.00	50.00	.00	16.00
Grand Total	160.00	50.00	.00	110.00

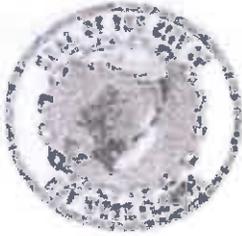
THE PROPOSED CONSTRUCTION IS PERMITTED ON CONDITION OF  
COMPLIANCE WITH ALL APPLICABLE CODES AND ORDINANCES AND IN  
CONFORMANCE WITH ALL PLANS, SPECIFICATIONS AND ESTIMATES  
SUBMITTED WITH THE SUBJECT APPLICATION. PERMIT VOID UNLESS  
CONSTRUCTION COMMENCED WITHIN 180 DAYS OF ISSUE.

7/27/15  
DATE ISSUED  
BY [Signature]

COMBINATION APPLICATION: FLOODPLAIN, CONSTRUCTION AND HARC

\$50.00 APPLICATION FEE NON-REFUNDABLE

**MECH/HARC/FEMP**



**City of Key West**

3140 FLAGLER AVENUE  
KEY WEST, FLORIDA 33040

Phone: 305.809.3956

HARC PERMIT NUMBER <b>15-01-1081</b>		BUILDING PERMIT NUMBER <b>15-2863</b>		DATE & DATE <b>IN 3/15</b> <b>US 11/15</b>
FLOODPLAIN PERMIT			REVISION #	
FLOODLINE	PARCEL #	ELEV. FL	SUBSTANTIAL IMPROVEMENT	
			YES	NO

ADDRESS OF PROPOSED PROJECT:

**920 CAROLINE STREET**

# OF UNITS

RE # OR ALTERNATE KEY:

**1002895**

NAME ON DEED:

**PENSICO TRUST COMPANY**

PHONE NUMBER

OWNER'S MAILING ADDRESS:

**191 PEARL AVE**

EMAIL

**TAVERNIER FL 33070-2421**

CONTRACTOR COMPANY NAME:

**ALL WEATHER A/C**

PHONE NUMBER

**305 360 0892**

CONTRACTOR'S CONTACT PERSON:

**MICHAEL GIBBONS**

EMAIL

**MGRWBIGFISH@COMPAST.NET**

ARCHITECT / ENGINEER'S NAME:

PHONE NUMBER

ARCHITECT / ENGINEER'S ADDRESS:

EMAIL

HARC: PROJECT LOCATED IN HISTORIC DISTRICT OR IS CONTRIBUTING:  YES  NO (SEE PART C FOR HARC APPLICATION.)

CONTRACT PRICE FOR PROJECT OR ESTIMATED TOTAL FOR MATL., LABOR & PROFIT:

**\$5,500.00**

FLORIDA STATUTE 837.06 WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING AND WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE PUNISHABLE PER SECTION 778.022 OR 778.023

PROJECT TYPE:  ONE OR TWO FAMILY  MULTI-FAMILY  COMMERCIAL  NEW  REMODEL  
 CHANGE OF USE / OCCUPANCY  ADDITION  SIGNAGE  WITHIN FLOOD ZONE  
 DEMOLITION  SITE WORK  INTERIOR  EXTERIOR **AFTER THE FACT**

DETAILED PROJECT DESCRIPTION INCLUDING QUANTITIES, SQUARE FOOTAGE ETC.,

**REPLACE EXISTING**

**A/C SYSTEM - FRONT PORTION OF BLDG. 5TON CONDENSING UNIT  
MOUNTED ON EXISTING STAND ON ROOF NEW AIR HANDLER TO BE  
HUNG HORIZONTAL ATTACHED TO EXISTING DUCTWORK**

I HAVE OBTAINED ALL NECESSARY APPROVALS FROM ASSOCIATIONS, GOVT AGENCIES AND OTHER PARTIES AS APPLICABLE TO COMPLETE THE DESCRIBED PROJECT.

OWNER PRINT NAME	QUALIFIER PRINT NAME <b>MICHAEL K. GIBBONS</b>
OWNER SIGNATURE	QUALIFIER SIGNATURE <i>Michael K. Gibbons</i>
Notary Signature as to owner	Notary Signature as to qualifier
STATE OF FLORIDA, COUNTY OF MONROE, BORN TO AND SCRIBED BEFORE ME THIS <b>15</b> DAY OF <b>July</b> 2015	STATE OF FLORIDA, COUNTY OF MONROE, BORN TO AND SCRIBED BEFORE ME THIS <b>15</b> DAY OF <b>July</b> 2015
Personally known or produced	Personally known or produced

4999617057-OK

*Plan Reviewed  
Tara N Richardson  
July 21, 2015*

**PART B: SUPPLEMENTARY PROJECT DETAILS TO AVOID DELAYS / CALL-BACKS**

PROPERTY STRUCTURES AFFECTED BY PROJECT:  MAIN STRUCTURE  ACCESSORY STRUCTURE  SITE

ACCESSORY STRUCTURES:  GARAGE / CARPORT  DECK  FENCE  OUTBUILDING / SHED

FENCE STRUCTURES:  4 FT.  6 FT. SOLID  6 FT. / TOP 2 FT. 50% OPEN

POOLS:  INGROUND  ABOVE GROUND  SPA / HOT TUB  PRIVATE  PUBLIC  
PUBLIC POOLS REQUIRE 90. OF HEALTH LICENSE APPLICATION AT TIME OF CITY APPLICATION.  
 PUBLIC POOLS REQUIRE 90. OF HEALTH LICENSE PRIOR TO RECEIVING THE CITY CERTIFICATE OF OCCUPANCY.

ROOFING:  NEW  ROOF-OVER  TEAR-OFF  REPAIR  AWNING  
 5 V METAL  ASPLT. SHGLS.  METAL SHGLS.  BLT. UP  TPO  OTHER

FLORIDA ACCESSIBILITY CODE:  20% OF PROJECT FUNDS INVESTED IN ACCESSIBILITY FEATURES.

SIGNAGE:  # OF SINGLE FACE  # OF DOUBLE FACE  REPLACE SKIN ONLY  BOULEVARD ZONE  
 POLE  WALL  PROJECTING  AWNING  HANGING  WINDOW  
 SQ. FT. OF EACH SIGN FACE:

SUBCONTRACTORS / SPECIALTY CONTRACTORS SUPPLEMENTARY INFORMATION:

MECHANICAL:  DUCTWORK  COMMERCIAL EXH. HOOD  INTAKE / EXH. FANS  LPG TANKS  
 A/C:  COMPLETE SYSTEM  AIR HANDLER  CONDENSER  MINI-SPLIT

ELECTRICAL:  LIGHTING  RECEPTACLES  HOOK-UP EQUIPMENT  LOW VOLTAGE  
 SERVICE:  OVERHEAD  UNDERGROUND  1 PHASE  3 PHASE  AMPS

PLUMBING:  ONE SEWER LATERAL PER BLDG.  INGROUND GREASE INTCPTRS.  LPG TANKS

RESTROOMS:  MEN'S  WOMEN'S  UNSEX  ACCESSIBLE

**PART C: HARC APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS**

APPLICATION FEES: PAINTING SINGLE FAMILY: \$10 STAFF APPROVAL: \$50 COMMISSION REVIEW \$100  
 PLEASE ATTACH APPROPRIATE VARIANCES / RESOLUTIONS FROM HARC, PLANNING BOARD OR TREE COMMISSION  
 ATTENTION: NO BUILDING PERMITS WILL BE ISSUED PRIOR TO HARC APPROVAL.

PLEASE SEND ELECTRONIC SUBMISSIONS TO: [harc@cityofsevenspringsfl.gov](mailto:harc@cityofsevenspringsfl.gov)  
 INDICATE TYPE OF CERTIFICATE OF APPROPRIATENESS:  GENERAL  DEMOLITION  SIGN  PAINTING  OTHER

ADDITIONAL INFORMATION:

PROJECT SPECIFICATIONS: PLEASE PROVIDE PHOTOS OF EXISTING CONDITIONS, PLANS, PRODUCT SAMPLES, TECHNICAL DATA

ARCHITECTURAL FEATURES TO BE ALTERED:	ORIGINAL MATERIAL:	PROPOSED MATERIAL:
INSTALLATION OF 5 TON		
A/C SYSTEM - OUTDOOR		
UNIT ON ROOF - NOT		
VISIBLE FROM GROUND		

DEMOLITION: PLEASE FILL OUT THE HARC APPENDIX FOR PROPOSED DEMOLITION.

DEMOLITION OF HISTORIC STRUCTURES IS NOT ENCOURAGED BY THE HISTORIC ARCHITECTURAL REVIEW COMMISSION.

SIGNAGE: (SEE PART B)  BUSINESS SIGN  BRAND SIGN  OTHER: \_\_\_\_\_

BUSINESS LICENSE # \_\_\_\_\_ IF FAÇADE MOUNTED, SQ. FT. OF FAÇADE \_\_\_\_\_

Date: 7/13/15 50 Receipt No: 28245  
 2015 100191  
 4 BUILDING PERMITS  
 TRANS NUMBER 1.00 906.00  
 OR VIEW/MASTER 2000.25  
 5198.00  
 TRANS DATE: 7/13/15 TIME: 11:27:46

SIGN SPECIFICATIONS		
DESK COPY:	PROPOSED MATERIALS:	SIGNS WITH ILLUMINATION:
		TYPE OF LTB:
		LTB LINEAL FTG:
MAX. HGT. OF FONTS:		COLOR AND TOTAL LUMENS:
IF USING LIGHT FIXTURES PLEASE INDICATE HOW MANY: INCLUDE SPEC. SHEET WITH LOCATIONS AND COLORS.		

OFFICIAL USE ONLY: HARC STAFF OR COMMISSION REVIEW		
<input checked="" type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED	<input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION
<input type="checkbox"/> TABLED FOR ADD'L. INFO.		
HARC MEETING DATE:	HARC MEETING DATE:	HARC MEETING DATE:
REASONS OR CONDITIONS:		
START REVIEW COMMENTS: If railings are needed, <del>they</del> they need HARC approval		
HARC PLANNER SIGNATURE AND DATE: 7/14/15 [Signature]		HARC CHAIRPERSON SIGNATURE AND DATE:

**PART D: STATE OF FLORIDA OFFICIAL NOTIFICATIONS AND WARNINGS**

FLORIDA STATUTE 713.135: WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED WITH THE COUNTY RECORDER AND A COPY POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING A NOTICE.

FLORIDA STATUTE 409: ASBESTOS ABATEMENT. AS OWNER / CONTRACTOR / AGENT OF RECORD FOR THE CONSTRUCTION APPLIED FOR IN THIS APPLICATION, I AGREE THAT I WILL COMPLY WITH THE PROVISIONS F. S. 469.003 AND TO NOTIFY THE FLORIDA D. E. P. OF MY INTENT TO DEMOLISH / REMOVE ASBESTOS. IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT APPLICATION, THERE MAY BE DEED RESTRICTIONS AND / OR ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF MONROE COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENT ENTITIES SUCH AS AQUADUCT AUTHORITY, FLORIDA DEP OR OTHER STATE AGENCIES, ARMY CORPS OF ENGINEERS OR OTHER FEDERAL AGENCIES.

FEDERAL LAW REQUIRES LEAD PAINT ABATEMENT FOR THE STANDARDS OF THE USEP ON STRUCTURES BUILT PRIOR TO 1976.

OFFICIAL USE ONLY BY PLANS EXAMINER OR CHIEF BUILDING OFFICIAL:				CBD OR PL. EXAM. APPROVAL:
HARC FEES:	BLDG. FEES:	FIRE MARSHAL FEE:	IMPACT FEES:	
50-	\$141.00			[Signature]
25-	\$ 10.00 PR -			DATE:
	\$ 3.00 FEE -			July 21, 2015
	\$ 2.00 FEE -			
	\$ 2.00 FEE -			

COMBINATION APPLICATION: FLOODPLAIN, CONSTRUCTION AND HARC

\$50.00 APPLICATION FEE NON-REFUNDABLE



City of Key West

3140 FLAGLER AVENUE  
KEY WEST, FLORIDA 33040

Phone: 305.809.3956

HARC PERMIT NUMBER <b>K-01-506</b>	BUILDING PERMIT NUMBER <b>15-1502</b>	INITIAL & DATE
FLOODPLAIN PERMIT	REVISION #	
FLOOD ZONE	PANEL #	ELEV. FT.
SUBSTANTIAL IMPROVEMENT		YES NO

ADDRESS OF PROPOSED PROJECT:

**920 CAROLINE ST.**

# OF UNITS

RE # OR ALTERNATE KEY:

NAME ON DEED:

**DREW MACKENZIE**

PHONE NUMBER

OWNER'S MAILING ADDRESS:

**100 VILLA BELLA DR.**

EMAIL

**ISLAMORADA FL 33036**

CONTRACTOR COMPANY NAME:

**ALL WEATHER A/C REFRIG. INC.**

PHONE NUMBER

**305 360 0842**

CONTRACTOR'S CONTACT PERSON:

**Michael Gibbons**

CARD

**MIGKWBIGR@COMCAST.NET**

ARCHITECT / ENGINEER'S NAME:

PHONE NUMBER

ARCHITECT / ENGINEER'S ADDRESS:

EMAIL

HARC: PROJECT LOCATED IN HISTORIC DISTRICT OR IS CONTRIBUTING: YES  NO (SEE PART C FOR HARC APPLICATION)

CONTRACT PRICE FOR PROJECT OR ESTIMATED TOTAL FOR MATERIAL, LABOR & PROFIT:

**\$2,500.00**

FLORIDA STATUTE 837.06: WHOEVER KNOWINGLY MAKES A FALSE STATEMENT OR OMITTING AND WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTY SHALL BE GUILTY OF MISDEMEANOR OF THE SECOND DEGREE PUNISHABLE PER SECTION 175.082 OR 175.083

PROJECT TYPE:  ONE OR TWO FAMILY  MULTI-FAMILY  COMMERCIAL  NEW  REMODEL  
 CHANGE OF USE / OCCUPANCY  ADDITION  SIGNAGE  WITHIN FLOOD ZONE  
 DEMOLITION  SITEWORK  INTERIOR  EXTERIOR  AFTER-THE-FACT

DETAILED PROJECT DESCRIPTION INCLUDING QUANTITIES, SQUARE FOOTAGE ETC.

**REPLACE EXISTING 5 TON A/C UNIT ON FRONT PORTION OF BAR**

I HAVE OBTAINED ALL NECESSARY APPROVALS FROM ASSOCIATIONS, GOVT AGENCIES AND OTHER PARTIES AS APPLICABLE TO COMPLETE THE DESCRIBED PROJECT.	OWNER PRINT NAME	QUALIFIER PRINT NAME <b>Michael K. Gibbons</b>
OWNER SIGNATURE	OWNER SIGNATURE	QUALIFIER SIGNATURE <b>Michael K. Gibbons</b>
Notary Signature as to owner	Notary Signature as to qualifier	
STATE OF FLORIDA, COUNTY OF MONROE, SWORN TO AND SCRIBED BEFORE ME THIS <u>23</u> DAY OF <u>April</u> 20 <u>15</u>	STATE OF FLORIDA, COUNTY OF MONROE, SWORN TO AND SCRIBED BEFORE ME THIS <u>23</u> DAY OF <u>April</u> 20 <u>15</u>	
Personally known or produced	Personally known or produced	Notary Seal MIRIAM CLEAVE Commission # FF 215484 Expires March 30, 2015 Contact the Key West notary at 305-894-1700

4/9996-7057

**PART B: SUPPLEMENTARY PROJECT DETAILS TO AVOID DELAYS / CALL-BACKS**

PROPERTY STRUCTURES AFFECTED BY PROJECT:  MAIN STRUCTURE  ACCESSORY STRUCTURE  SITE

ACCESSORY STRUCTURES:  GARAGE / CARPORT  DECK  FENCE  OUTBUILDING / SHED

FENCE STRUCTURES:  4 FT.  6 FT. SOLID  6 FT. / TOP 2 FT. 50% OPEN

POOLS:  INGROUND  ABOVE GROUND  SPA / HOT TUB  PRIVATE  PUBLIC  
PUBLIC POOLS REQUIRE BD. OF HEALTH LICENSE APPLICATION AT TIME OF CITY APPLICATION.  
 PUBLIC POOLS REQUIRE BD. OF HEALTH LICENSE PRIOR TO RECEIVING THE CITY CERTIFICATE OF OCCUPANCY.

ROOFING:  NEW  ROOF-OVER  TEAR-OFF  REPAIR  AWNING  
 5 V METAL  ASPLT. SHGLS.  METAL SHGLS.  BLT. UP  TPO  OTHER

FLORIDA ACCESSIBILITY CODE:  20% OF PROJECT FUNDS INVESTED IN ACCESSIBILITY FEATURES.

SIGNAGE:  # OF SINGLE FACE  # OF DOUBLE FACE  REPLACE SKIN ONLY  BOULEVARD ZONE  
 POLE  WALL  PROJECTING  AWNING  HANGING  WINDOW  
 SQ. FT. OF EACH SIGN FACE: \_\_\_\_\_

SUBCONTRACTORS / SPECIALTY CONTRACTORS SUPPLEMENTARY INFORMATION:

MECHANICAL:  DUCTWORK  COMMERCIAL EXH. HOOD  INTAKE / EXH. FANS  LPG TANKS  
 A/C:  COMPLETE SYSTEM  AIR HANDLER  CONDENSER  MINI-SPLIT

ELECTRICAL:  LIGHTING  RECEPTACLES  HOOK-UP EQUIPMENT  LOW VOLTAGE  
 SERVICE:  OVERHEAD  UNDERGROUND  1 PHASE  3 PHASE  AMPS

PLUMBING:  ONE SEWER LATERAL PER BLDG.  INGROUND GREASE INTCPTRS.  LPG TANKS

RESTROOMS:  MEN'S  WOMEN'S  UNISEX  ACCESSIBLE

**PART C: HARC APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS**

APPLICATION FEES: PAINTING SINGLE FAMILY: \$10 STAFF APPROVAL: \$50 COMMISSION REVIEW \$100  
 PLEASE ATTACH APPROPRIATE VARIANCES / RESOLUTIONS FROM HARC PLANNING BOARD OR TREE COMMISSION.  
 ATTENTION: NO BUILDING PERMITS WILL BE ISSUED PRIOR TO HARC APPROVAL.

PLEASE SEND ELECTRONIC SUBMISSIONS TO: [harc@cityofwest-fla.gov](mailto:harc@cityofwest-fla.gov)  
 INDICATE TYPE OF CERTIFICATE OF APPROPRIATENESS:  GENERAL  DEMOLITION  SIGN  PAINTING  OTHER  
 ADDITIONAL INFORMATION: \_\_\_\_\_

PROJECT SPECIFICATIONS: PLEASE PROVIDE PHOTOS OF EXISTING CONDITIONS, PLANS, PRODUCT SAMPLES, TECHNICAL DATA

ARCHITECTURAL FEATURES TO BE ALTERED:	ORIGINAL MATERIAL:	PROPOSED MATERIAL:
Replace existing 5 ton A/C unit front portion of bar		

DEMOLITION: PLEASE FILL OUT THE HARC APPENDIX FOR PROPOSED DEMOLITION.  
 DEMOLITION OF HISTORIC STRUCTURES IS NOT ENCOURAGED BY THE HISTORIC ARCHITECTURAL REVIEW COMMISSION.

SIGNAGE: (SEE PART B)  BUSINESS SIGN  BRAND SIGN  OTHER: \_\_\_\_\_

BUSINESS LICENSE # \_\_\_\_\_ IF FAÇADE MOUNTED, SQ. FT. OF FAÇADE \_\_\_\_\_

SIGN SPECIFICATIONS		
SIGN COPY:	PROPOSED MATERIALS:	SIGNS WITH ILLUMINATION:
		TYPE OF LYS:
		LYS LINEAL FTG:
MAX. HGT. OF FONTS:		COLOR AND TOTAL LUMENS:
IF USING LIGHT FIXTURES PLEASE INDICATE HOW MANY: INCLUDE SPEC. SHEET WITH LOCATIONS AND COLORS		

OFFICIAL USE ONLY: HARC STAFF OR COMMISSION REVIEW		
<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED	<input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION
<input type="checkbox"/> TABLED FOR ADD'L INFO		
HARC MEETING DATE:	HARC MEETING DATE:	HARC MEETING DATE:
REASONS OR CONDITIONS:		
STAFF REVIEW COMMENTS:		
HARC PLANNER SIGNATURE AND DATE:		HARC CHAIRPERSON SIGNATURE AND DATE:

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FEDERAL LAW REQUIRES LEAD PAINT ABATEMENT PER THE STANDARDS OF THE USEP ON STRUCTURES BUILT PRIOR TO 1978.

OFFICIAL USE ONLY BY PLANS EXAMINER OR CHIEF BUILDING OFFICIAL:				CBO OR PL. EXAM. APPROVAL:
HARC FEES:	BLDG. FEES:	FIRE MARSHAL FEE:	IMPACT FEES:	Types of Drawings: Receipt no: 20060 * BUILDING PERMITS-NEW DATE: 08/16/06 \$50.00 \$847.00 \$20.00
			Oper: REYNOLD Date: 4/24/15 EA 2015 100056 DT Trans numbers UM VISU/MASTERC	

Property address : 920 CAROLINE ST  
RE #/PARCEL #/TAX ID etc : 0000-2790-000000- -

Source	Misc info code	Note	Date
LAND	BPCM	***RED ALERT*** Refer to FEMA	8/07/14
LAND	BPCM	Coordinator for first review [H.L.	8/07/14
LAND	BPCM	property]	8/07/14
LAND	DESC	Text	2/08/12
LAND	DESC	***BUILDING PERMIT ALERT: NEARING 50%	2/08/12
LAND	DESC	LEVEL FOR FEMA. PRINT THIS SCREEN AND	2/08/12
LAND	DESC	ADD TO NEW PERMIT APPLICATIONS***	2/08/12

Press Enter to continue.  
F3=Exit F12=Cancel